We offer assistance to many constituents when claims or medical equipment coverage has been denied, in understanding the enrollment process, and in answering general questions. If you have tried to resolve a problem with Medicare and have run into problems, we might be able to help. You will need to fill out a <u>privacy release form</u>. According to the Privacy Act of 1974, your written permission is required for us to inquire about your situation with any federal agency. Just print it, fill it out, be sure to sign it, and send it to our district office address listed on the form.

Frequently Asked Questions:

Q What is the difference between Part A and Part B, and what do they cover?

Medicare Part A is known as hospital coverage. Part A covers inpatient hospital care, inpatient care in a skilled nursing facility following a hospital stay, some home health care, and hospice care. If you paid FICA taxes while you were working, Part A coverage is free except for coinsurance and deductibles.

Medicare Part B covers outpatient services. These services include doctors' services, diagnostic tests, durable medical equipment, ambulance service and many other health services and supplies not covered by Medicare Part A. If you want Part B coverage, you must sign up at the Social Security Office when you're 65 and pay a monthly premium.

Please note that Medicare does not cover custodial (bathing, personal care services, help eating) care in or out of a nursing home.

Q What if Medicare refuses a claim and I disagree with them?

You have the right to appeal. Information on the process would be included in any denial decision you receive. You may contact my office for assistance in this process.

Q My Medicare HMO has discontinued my coverage. What do I do?

You have 63 days from the time your HMO coverage ends to purchase supplemental insurance (Medigap) and be guaranteed coverage. During that period, no insurance company may deny you Medigap coverage based on your age or health status. However, prices may vary. For more information on Medigap, call Medicare at 1-800-633-4227.

Additionally, the State Health Insurance Assistance Program (SHIPS) can assist in listing your options. You may contact SHIPS at 1-800-803-7174. The Area Agency on Aging is another useful resource and may be reached at 1-800-852-7795.

Q I am having trouble affording coverage. Are there any programs that can help pay for my coverage?

Yes, you may contact my office for information on other available programs.

Q Can I delay my Medicare Part B enrollment without paying higher premiums?

Yes. If you or your spouse has group health insurance from an employer or union, you may be able to delay enrolling in Part B without having to pay higher premiums. However, exceptions are very limited, so be sure to check with the Social Security Office before you decide not to enroll at 65.

Q. What if I have signed-up for a prescription drug plan but I am experiencing problems getting my prescription filled or have been charged the wrong amount?

If you have not been able to resolve these problems with your plan sponsor, call Medicare at 1-800-Medicare (633-4227).